

## EXHIBIT D

Print Time: 15:21

Hudson Valley Hospital  
1980 Crompond Road  
Cortlandt Manor, NY 10567  
(914)734-3300

Print Date: 12/20/2011  
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## Physician Notes

Patient Name: WHALEN, DANIEL Date of Service: 11/08/2011 ED Physician: Mally  
Date of Birth: 10/19/1955 Age: 56 Yrs Sex: M Chart #: 422597 PMD: Zarcone

TX:=====

## TRIAGE NOTES:

C/O NECK PAIN. I CRACK IT THIS AM WHEN MY CHAIR FELL BACK

ALLERGIES (Reaction): NKDA;

CURRENT MEDICATIONS: NONE

VITAL SIGNS: Temp: 98.2 F Oral Pulse: 60 Resp: 18 Weight: 86 Kg BP: 126/86 Pulse ox: 98%

===== (TX) End

PRESENTING PROBLEM: Neck pain

HISTORY OF PRESENT ILLNESS: DANIEL WHALEN is a 56 -year-old Male who reports not radicular pain in the neck since falling backwards in a reclining chair this morning. Otherwise: (-) paresthesias, (-) weakness, (-) fever, (-) sore throat. Has no history of prior neck problem.

PMD: Zarcone

REVIEW OF SYSTEMS: Other than the symptoms associated with the present events, the following is reported with regard to recent health: General: (-) fever. HENT: (-) congestion. Respiratory: (-) cough. Cardiovascular: (-) chest pain. GI: (-) abdominal pain. GU: (-) urinary complaints. Musculoskeletal: (-) other aches or pains. Endocrine: (-) generalized weakness. Neurological: (-) prior localized weakness. Psychiatric: (-) emotional stress.

PAST MEDICAL HISTORY: (-) DM, (-) HTN, (-) asthma, (-) COPD, (-) heart disease.

FAMILY HISTORY: (-) known inherited disease

SOCIAL HISTORY: (-) smoking

MEDICATIONS: Per nurse's note, reviewed by me NONE

ALLERGIES: Per nurse's note, reviewed by me NKDA

## PHYSICAL EXAMINATION:

GENERALIZED APPEARANCE: Patient is alert, awake and in no distress.

VITAL SIGNS: Temp: 98.2 F Oral Pulse: 60 Resp: 18 Weight: 86 Kg BP: 126/86 Pulse ox: 98%

SKIN: Warm, dry; (-) cyanosis. (-) rash in area of pain.

HEAD: (-) scalp swelling, (-) scalp tenderness.

EYES: (-) conjunctival pallor.

ENMT: Pharynx clear, (-) erythema, (-) swelling. Airway patent, (-) stridor, (-) hoarseness. Mucous membranes moist.

NECK: mild tenderness of right lateral neck, (-) lymphadenopathy, (-) thyromegaly, (-) mass. Pain aggravated by lateral flexion to lateral side.

CHEST AND RESPIRATORY: (-) rales, (-) rhonchi, (-) wheezes; breath sounds equal bilaterally.

EXTREMITIES: Shoulders and arms nontender. Distal pulses normal.

NEURO AND PSYCH: Strength of deltoid, biceps, triceps normal. DTRs symmetric. Sensation normal.

The diagnostic results contained in this document reflect the information available to the physician at the time of the patient encounter. Final results, when completed, will be found in the patient's permanent hospital medical chart.

## DIAGNOSTICS:

Patient: Whalen, Daniel A Ordering Physician: Jose, Helma

## \*\*\*\*\* FINAL REPORT \*\*\*\*\*

Examination: Cervical spine, 3 views Clinical Indication: Trauma and pain Findings: AP, lateral and open-mouth views of the cervical spine include all 7 cervical vertebrae. There is no focal soft tissue swelling. There is loss of normal cervical lordosis. There is degenerative disc disease at C5-C6 and C6-C7 para- There is no evidence for fracture or dislocation. The relationship of C1 and C2 appears normal and the odontoid is intact. Impression: 1. Loss of lordosis consistent with muscle spasm 2. Degenerative disc disease. 3. No fracture Dictated By: - 721470 Elliott Summers, MD 20111108 1132 Signed By: - 721470 - Elliott Summers, MD 20111108 1132

EMERGENCY DEPARTMENT COURSE AND TREATMENT: Patient's condition improved during Emergency Department evaluation. Patient treated with Flexeril 10mg PO, Vicodin (1), and Toradol 60mg IM. On re-exam patient states that he is pain free and would like to go home. On discharge the patient ambulates freely and walks with a steady gait.

After the evaluation in the Emergency Department, my clinical impression is Torticollis/neck strain.

PLAN AND FOLLOW-UP: Patient received written and verbal instructions regarding this condition. Follow up to be arranged by patient with PMD in 1-2 days for further evaluation. Return if any weakness, numbness, incontinence, or increased pain.

===== Emergency Physician Note =====

Helma Jose PA, participated in the evaluation, management and treatment of this patient. The orders and the chart were reviewed and approved by me.

WHALEN, DANIEL

MDSeen:

Medrec #: 2442

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## Physician Notes

RX: =====

Medication: Flexeril  
Dosage: 10 mg  
Disp: #15  
Sig: 1 Tab PO three times a day PRN spasm  
Written by: Helma Jose

Medication: Naprosyn-EC  
Dosage: 500 mg  
Disp: #20  
Sig: 1 Tab PO two times a day with food  
Written by: Helma Jose

Medication: Vicodin  
Dosage: hydrocodone 5 mg + APAP 500 mg  
Disp: # 15(fifteen)  
Sig: 1 to 2 Tabs PO every 4 to 6 hours PRN, not to exceed 8 tabs per 24 hours  
Written by: Helma Jose

=====(RX) End

Digitally signed by Dr. Maily, Douglas on Tuesday, November 08, 2011 at 18:03

Condition: Stable

Diagnosis: NECK PAIN./STRAIN

CPT Codes :99283P

These notes were digitally signed by Dr. Douglas Maily MD on Tuesday, November 08, 2011 at 18:03

Physician: Maily Douglas MD

PMD: Zarcone

PA: Jose, Helma

Resident: